

The Kitchen Restaurant  
Credit Card Authorization Form

I, \_\_\_\_\_, hereby authorize The Kitchen Restaurant to charge my credit card account in the amount not to exceed \$ \_\_\_\_\_.

Gift Card Purchase

— OR —

Pre-Pay for Dining Room

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Amount of gratuity applied to dining room purchases:

18%       20%       Other (please specify) \_\_\_\_\_.

Credit Card Billing Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ - \_\_\_\_\_ email: \_\_\_\_\_

\_\_\_\_\_  
Cardholder's Signature

\_\_\_\_\_  
Date

Gift Card Info:

From: \_\_\_\_\_ To: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Notes: \_\_\_\_\_

